

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IF NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	J.M	5C864	4/17/01 4/27/01
<b>RESPONSE FORMALITY REVIEW</b>	NET	571	10/02/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	5/1/03
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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Claim	Date
Final	Original
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions  
staple additional sheet here

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